

SISKIYOU ICE RINK 2024-2025

Nov. 16, 2024 – FEB. 23, 2025



Choose Season Pass Type

Ice Skate Passes: *Includes skate rentals & admission to all public skate sessions.*

Family*: \$310 Adult (18+): \$175 Youth (4-17)/Senior (65+): \$145 (ages 3 & under free w/ adult)

Hockey “All-Access” Passes:** *Includes skate rentals and admissions to pick-up hockey & Ice Breakers skill-building classes, practices & games, plus entrance to all public skate sessions. Additional USA Hockey Membership fee may apply, see box below.*

Family*: \$330 Adult (18+): \$190 *Adult goalie free* Youth (4-17)/Senior (65+): \$160

*** Family passes include up to 4 family members who reside at one household/address. No more than 2 adults per family pass. \$35/additional youth add-on.**



PASSHOLDER'S

FIRST NAME, LAST NAME & AGE:
Required for Rink Admission



Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Family pass add on-\$35/additional youth

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

**USA Hockey Membership

All Ice Breakers Hockey participants, coaches and volunteers are required to become a USA Hockey member.

Register online at usahockey.com

For more information:

Rink (530) 926-1715, District office (530) 926-2494

<https://msrec.org/ice-rink>

Find us on Facebook and Instagram

Mailing Address: _____

- Please print - Street Address City, State & Zip Code

Phone: _____ **Email:** _____

-Mail in Check (payable to MSRPD) P.O Box 314, Mt. Shasta, CA 96067 (include this form)

-Cash or Check in person at the MS District office, 1315 Nixon Rd. Mt. Shasta, CA

-Credit card at the Siskiyou Ice Rink during normal season operation (through FOR).

Amount Paid: \$
Circle Method:
Cash CC
Check #:

PASSHOLDERS MUST CHECK IN AT THE RINK'S TICKET WINDOW UPON EACH VISIT DURING THE SEASON

Mt. Shasta Recreation & Parks District (MSRPD) and Friends of the Rink (FOR) bear no financial responsibility to the pass-holder(s) identified above due to unforeseen circumstances beyond the control of MSRPD and FOR which may jeopardize the rink operation during the 2024-2025 season (i.e. inclement weather, mechanical malfunctions, budgetary constraints).

MOUNT SHASTA RECREATION AND PARKS DISTRICT

Siskiyou Ice Rink- Pickup Hockey Sessions (ages 16+)

November 16, 2024-February 23, 2025

Activity Name

Activity Dates

Participant Name _____

Address _____ Phone # _____

Email _____

Emergency Contact Phone# _____

AGREEMENT, WAIVER, AND RELEASE

In consideration for being permitted by the District to participate in the above-referenced activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the District (including its officers, employees, volunteers, and agents) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of active or passive negligence or carelessness on the part of the persons or entities mentioned above.

It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs, administrators, executors, and assigns and that I shall indemnify and hold the District (including its officers, employees, volunteers, and agents) free and harmless from any loss, liability, damage, cost, or expense which may arise out of or connected in any way with my participation in said activity.

Additionally, I fully understand that my participation in the above-referenced activity exposes me to the risk of personal injury, death, communicable diseases, illnesses, viruses, and/or property damage. I hereby acknowledge that I am voluntarily participating in this activity and agree to assume any such risks.

PHOTOGRAPHIC RELEASE: I understand that photographs may be taken during this activity and hereby grant the District permission to use any such photo(s) for advertising or in promotional materials.

PARENTAL/GUARDIAN CONSENT: (to be completed and signed by parent/guardian if Participant is under 18 years of age.)

I hereby consent that my son/daughter, _____, participate in the above-referenced activity, and I hereby execute the above Agreement, Waiver, and Release on his/her behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the District (including its officers, employees, volunteers, and agents) free and harmless from any loss, liability, damage, cost, or expense which may arise out of or connected in any way with said minor's participation in said activity.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE DISTRICT AND I SIGN IT OF MY FREE WILL.

Signature

Name (Printed)

Date

**MOUNT SHASTA RECREATION AND PARKS DISTRICT
and MOUNT SHASTA ICEBREAKERS, INC (MSI)**

Siskiyou Ice Rink - All Access Pass for Hockey and Public Skate

November 16, 2024-February 23, 2025

Activity Name

Activity Dates

Participant Name _____

Address _____ Phone # _____

Email _____

Emergency Contact Phone# _____

AGREEMENT, WAIVER, AND RELEASE

In consideration for being permitted by the District and MSI to participate in the above-referenced activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the District (including its officers, employees, volunteers, and agents) and MSI (including its officers, employees, volunteers, and agents) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of active or passive negligence or carelessness on the part of the persons or entities mentioned above.

It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs, administrators, executors, and assigns and that I shall indemnify and hold the District (including its officers, employees, volunteers, and agents) and MSI (including its officers, employees, volunteers, and agents) free and harmless from any loss, liability, damage, cost, or expense which may arise out of or connected in any way with my participation in said activity.

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Signature

Name (Printed)

Date

MOUNT SHASTA RECREATION AND PARKS DISTRICT

Siskiyou Ice Rink -Ice Skating Lessons

November 16, 2024-February 23, 2025

Activity Name

Activity Dates

Participant Name _____

Address _____ Phone # _____

Email _____

Emergency Contact Phone# _____

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Signature Name (Printed) Date

MOUNT SHASTA RECREATION AND PARKS DISTRICT

Siskiyou Ice Rink - Ice Skate Pass for Public Skate Sessions

November 16, 2024-February 23, 2025

Activity Name

Activity Dates

Participant Name _____

Address _____ Phone # _____

Email _____

Emergency Contact Phone# _____

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Signature

Name (Printed)

Date